

227



CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

Please type or print legibly.

NOTE: See Instructions on reverse before filing.

1. The assumed business name which the undersigned use(s) in the transaction of business is:

NIRVANA FOODS

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

Complete Address

becky kemery

PO Box 134, Cocolalla ID 83813

3. The general type of business transacted under the assumed business name is:

- | | |
|--|--|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input checked="" type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Construction |
| <input checked="" type="checkbox"/> Services <i>Food</i> | <input type="checkbox"/> Agriculture |
| <input checked="" type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Finance, Insurance, and Real Estate | |

4. The name and address to which future correspondence should be addressed:

NIRVANA FOODS

PO Box 134

Cocolalla, ID 83813

5. Name and address for this acknowledgment copy is (If other than # 4 above):

Signature: becky kemery

Printed Name: becky kemery

Capacity: Sole Proprietor / owner

(see instruction # 5 on back of form)

Submit Certificate of
Assumed Business
Name and \$20.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

Phone number (optional): _____

Secretary of State use only

IDAHO SECRETARY OF STATE
10/18/2002 05:00
CK: 981 CT: 158818 BH: 576745
1 @ 20.00 = 20.00 ASSUM NAME # 2

DS9207

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Rev (ed 07/2001)

FILED EFFECTIVE
APR 12 2002 8:50
CLERK OF COURT